

**FORM
INSP**Rev
05/11**State of Colorado****Oil and Gas Conservation Commission**

1120 Lincoln Street, Suite 801, Denver, Colorado 80203 Phone: (303) 894-2100 Fax: (303) 894-2109



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Inspection Date:

11/06/2013

Document Number:

600000190

Overall Inspection:

Satisfactory**FIELD INSPECTION FORM**

Location Identifier	Facility ID	Loc ID	Inspector Name:	On-Site Inspection
	420052	420044	JOHNSON, RANDELL	<input type="checkbox"/> 2A Doc Num: _____

Operator Information:

OGCC Operator Number:

Name of Operator: NOBLE ENERGY INCAddress: 1625 BROADWAY STE 2200City: DENVER State: CO Zip: 80202☐ THIS IS A FOLLOW UP INSPECTION☐ FOLLOW UP INSPECTION REQUIRED☒ NO FOLLOW UP INSPECTION REQUIRED☒ INSPECTOR REQUESTS FORM 42 WHEN CORRECTIVE ACTIONS ARE COMPLETED**Contact Information:**

Contact Name	Phone	Email	Comment
Fogel, Heather		hfogel@nobleenergyinc.com	
Bruner, Ryan	303-228-4158	rbruner@nobleenergyinc.com	
Dumas, Ken	720-587-2150/34162	kdumas@nobleenergyinc.com	
Pavelka, Linda	970-304-5217	lpavelka@nobleenergyinc.com	

Compliance Summary:QtrQtr: SWSE Sec: 8 Twp: 4N Range: 66W**Inspector Comment:****Related Facilities:**

Facility ID	Type	Status	Status Date	Well Class	API Num	Facility Name	Insp Status	
420041	WELL	PR	05/13/2011	OW	123-32436	FIVE RIVERS K 08-24D	FR	<input checked="" type="checkbox"/>
420046	WELL	PR	04/21/2011	GW	123-32439	FIVE RIVERS K 08-23	FR	<input checked="" type="checkbox"/>
420052	WELL	PR	04/28/2011	GW	123-32441	FIVE RIVERS K 09-33D	FR	<input checked="" type="checkbox"/>
420053	WELL	PR	04/21/2011	GW	123-32442	FIVE RIVERS K 16-30D	FR	<input checked="" type="checkbox"/>

Equipment:**Location Inventory**

Special Purpose Pits: _____	Drilling Pits: _____	Wells: <u>4</u>	Production Pits: _____
Condensate Tanks: _____	Water Tanks: _____	Separators: _____	Electric Motors: _____
Gas or Diesel Motors: _____	Cavity Pumps: _____	LACT Unit: _____	Pump Jacks: _____
Electric Generators: _____	Gas Pipeline: _____	Oil Pipeline: _____	Water Pipeline: _____
Gas Compressors: _____	VOC Combustor: _____	Oil Tanks: _____	Dehydrator Units: _____
Multi-Well Pits: _____	Pigging Station: _____	Flare: _____	Fuel Tanks: _____

Location

Signs/Marker:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
BATTERY	Satisfactory			
WELLHEAD	Satisfactory			
TANK LABELS/PLACARDS	Satisfactory			

Emergency Contact Number: (S/U/V) Satisfactory

Corrective Date: _____

Comment: _____

Corrective Action: _____

Good Housekeeping:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
WEEDS	Unsatisfactory	Weeds at wellhead location	Remove weeds	12/06/2013

Spills:				
Type	Area	Volume	Corrective action	CA Date

☐ Multiple Spills and Releases?

Fencing/:				
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
OTHER	Satisfactory	Pipe fencing around pig station		
WELLHEAD	Satisfactory	Pipe fencing		

Equipment:					
Type	#	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date
Plunger Lift	1	Satisfactory	SE corner of fence around Five Rivers K 08-23 wellhead 40.32204, - 104.79748		
Plunger Lift	1	Satisfactory	SE corner of fence around Five Rivers K 08-24D wellhead 40.32202, - 104.79758		
Gas Meter Run	10	Satisfactory	SE corner of meter run houses 40.32286, - 104.79641		
Plunger Lift	1	Satisfactory	SE corner of fence around Five Rivers USX K 09-33D wellhead 40.32206, - 104.79733		
Emission Control Device	2	Satisfactory	SE corner of ECD's 40.32290, - 104.79678		
Plunger Lift	1	Satisfactory	SE corner of fence around Five Rivers K 16-30D wellhead 40.32204, - 104.79740		

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Horizontal Heated Separator	8	Satisfactory	SE corner of berm around separators 40.32286, - 104.79641		
Pig Station	1	Satisfactory	SE corner of fence around pig station 40.32296, - 104.79639		

Facilities:☐ New Tank

Tank ID: _____

Contents		#	Capacity	Type	SE GPS	
				CENTRALIZED BATTERY	40.322790,-104.797040	
S/U/V:	Satisfactory		Comment:	Centralized battery services Monfort Gilcrest K 8-8 (123-11109), Monfort Gilcrest K 8-9 (123-18038), Monfort Gilcrest K 8-10 (123-11089), Monfort Gilcrest K 8-14 (123-11124), Five Rivers K 09-33D (123-32441), Five Rivers K 16-30D (123-324420, Five Rivers K 08-23 (123-32439), Five Rivers K 08-24D (123-32436), Five Rivers K 08-22D (123-32581), Five Rivers K 08-07D (123-32582) & Five Rivers K 08-17D (123-32583)		
Corrective Action:					Corrective Date:	

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance			
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate			
Corrective Action						Corrective Date	
Comment							

Facilities:☐ New Tank

Tank ID: _____

Contents		#	Capacity	Type	SE GPS	
PRODUCED WATER		9	<100 BBLS	BV CONCRETE	40.322790,-104.797040	
S/U/V:	Satisfactory		Comment:	60 bbls		
Corrective Action:					Corrective Date:	

Paint

Condition	Adequate
Other (Content)	_____
Other (Capacity)	_____
Other (Type)	_____

Berms

Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance			
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate			
Corrective Action						Corrective Date	
Comment							

Facilities:		<input type="checkbox"/> New Tank		Tank ID: _____	
Contents	#	Capacity	Type	SE GPS	
CRUDE OIL	9	300 BBLS	STEEL AST	40.322790,-104.797040	
S/U/V:	Satisfactory		Comment: _____		
Corrective Action: _____				Corrective Date: _____	
Paint					
Condition	Adequate				
Other (Content) _____					
Other (Capacity) _____					
Other (Type) _____					
Berms					
Type	Capacity	Permeability (Wall)	Permeability (Base)	Maintenance	
Metal	Adequate	Walls Sufficient	Base Sufficient	Adequate	
Corrective Action				Corrective Date	
Comment _____					
Venting:					
Yes/No		Comment			
NO					
Flaring:					
Type	Satisfactory/Unsatisfactory	Comment	Corrective Action	CA Date	

Predrill

Location ID: 420052

Site Preparation:

Lease Road Adeq.: _____ Pads: _____ Soil Stockpile: _____

S/U/V: _____

Corrective Action: _____ Date: _____ CDP Num.: _____

Form 2A COAs:

Group	User	Comment	Date
OGLA	walkerv	Operator must implement best management practices including, but not limited to, construction of a berm or diversion dike, site grading, or other comparable measures sufficiently protective of the ditch located 122 feet to the north shown as B on the location drawing to prevent impact by any unintentional release of drilling, completion, or produced fluids	08/24/2010

DOW	greenmanc	<p>No surface occupancy or construction within 0.25 mile of any active bald eagle winter night roost site, where there is no direct line of sight to the roost, between December 1 and February 28 and within 0.5 mile of any active bald eagle winter night roost site, where there is a direct line of sight to the roost, between December 1 and February 28.</p> <p>•Within 0.5 mile of any active bald eagle winter roost site from November 15 to March 15, periodic visits such as maintenance and monitoring should be restricted to the period between 10:00 a.m. and 2:00 p.m. Minor workover or swabbing to improve production that could be completed within a 2-day time frame would be allowed.</p> <p>•If a closed loop system is not used, the reserve pit must be sucked dry immediately following drilling and completion activities, or the pit must be netted until fluids evaporate and the pit solids are reclaimed. After drilling and completion, all produced fluids will be contained in tanks.</p>	08/25/2010
OGLA	walkerv	Location is in a sensitive area because of shallow groundwater; therefore, either a lined drilling pit or closed loop system is required	08/24/2010
OGLA	walkerv	Surface disturbance shall not encroach on the ditch located 122 feet to the north shown as B on the location drawing	08/24/2010

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Wildlife BMPs:

S/U/V: _____ **Comment:** _____

CA: _____ **Date:** _____

Stormwater:

Comment: _____

Staking:

On Site Inspection (305):

Surface Owner Contact Information:

Name: _____ Address: _____

Phone Number: _____ Cell Phone: _____

Operator Rep. Contact Information:

Landman Name: _____ Phone Number: _____

Date Onsite Request Received: _____ Date of Rule 306 Consultation: _____

Request LGD Attendance: _____

LGD Contact Information:

Name: _____ Phone Number: _____ Agreed to Attend: _____

Summary of Landowner Issues:

Summary of Operator Response to Landowner Issues:

Onsite Inspection Memorandum Summarizing Discussions at Inspection as Attachment:

Facility

Facility ID: 420041 Type: WELL API Number: 123-32436 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: **SI**

Facility ID: 420046 Type: WELL API Number: 123-32439 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: **SI**

Facility ID: 420052 Type: WELL API Number: 123-32441 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: **SI**

Facility ID: 420053 Type: WELL API Number: 123-32442 Status: PR Insp. Status: FR

Idle Well

Purpose: ☒ Shut In ☐ Temporarily Abandoned Reminder: _____
 S/V: _____ CA Date: _____
 CA: _____
 Comment: **SI**

Environmental**Spills/Releases:**

Type of Spill: _____ Description: _____ Estimated Spill Volume: _____
 Comment: _____
 Corrective Action: _____ Date: _____
 Reportable: _____ GPS: Lat _____ Long _____
 Proximity to Surface Water: _____ Depth to Ground Water: _____

Water Well:

Lat _____ Long _____
 DWR Receipt Num: _____ Owner Name: _____ GPS: _____

Field Parameters:

Sample Location: _____

Emission Control Burner (ECB): _____

Comment: _____

Pilot: _____ Wildlife Protection Devices (fired vessels): _____

Reclamation - Storm Water - Pit**Interim Reclamation:**

Date Interim Reclamation Started: _____ Date Interim Reclamation Completed: _____

Land Use: DRY LAND

Comment: _____

1003a. Debris removed? Pass CM _____
 CA _____ CA Date _____
 Waste Material Onsite? Pass CM _____
 CA _____ CA Date _____
 Unused or unneeded equipment onsite? Pass CM _____
 CA _____ CA Date _____
 Pit, cellars, rat holes and other bores closed? Fail CM **Mousehole subsidence at Five Rivers K 08-24D**
 CA **Fill in mousehole** CA Date **12/06/2013**
 Guy line anchors removed? Pass CM _____
 CA _____ CA Date _____
 Guy line anchors marked? _____ CM _____
 CA _____ CA Date _____

1003b. Area no longer in use? Pass Production areas stabilized ? Pass

1003c. Compacted areas have been cross ripped? _____

1003d. Drilling pit closed? _____ Subsidence over on drill pit? _____

Cuttings management: _____

1003e. Areas no longer needed for drilling or subsequent operations for have been re-vegetated to 80% of pre-existing? PassProduction areas have been stabilized? Pass Segregated soils have been replaced? _____**RESTORATION AND REVEGETATION**Cropland

Top soil replaced _____ Recontoured _____ Perennial forage re-established _____

Non-Cropland

Top soil replaced _____ Recontoured _____ 80% Revegetation _____

1003 f. Weeds Noxious weeds? F

Comment: _____

Overall Interim Reclamation Pass**Final Reclamation/ Abandoned Location:**

Date Final Reclamation Started: _____ Date Final Reclamation Completed: _____

Final Land Use: DRY LAND

Reminder: _____

Comment: _____

Well plugged _____

Pit mouse/rat holes, cellars backfilled _____

Debris removed _____

No disturbance /Location never built _____

Access Roads Regraded _____

Contoured _____

Culverts removed _____

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Gravel removed _____

Location and associated production facilities reclaimed _____

Locations, facilities, roads, recontoured _____

Compaction alleviation _____ Dust and erosion control _____

Non cropland: Revegetated 80% _____

Cropland: perennial forage _____

Weeds present _____ Subsidence _____

Comment: _____

Corrective Action: _____ Date _____

Overall Final Reclamation

Well Release on Active Location ☐

Multi-Well Location ☐

Storm Water:

Loc Erosion BMPs	BMP Maintenance	Lease Road Erosion BMPs	Lease BMP Maintenance	Chemical BMPs	Chemical BMP Maintenance	Comment
Other	Pass	Other	Pass			Vegetation
Compaction	Pass	Compaction	Pass			
Gravel	Pass	Gravel	Pass			

S/U/V: Satisfactory _____ Corrective Date: _____

Comment: _____

CA: _____

Pits: ☒ NO SURFACE INDICATION OF PIT